

P16000026093

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

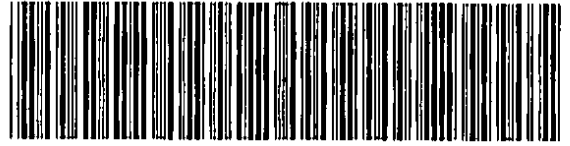
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2019 JAN -4 PM 4:06
SECRETARY OF STATE
TALLAHASSEE, FL

Rev.
of

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01/18/19

Dr



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 13, 2018

KATHRYN A. PARRIS
3535 MELROSE AVENUE
TITUSVILLE, FL 32780

SUBJECT: PARRIS MAZZA GLOBAL, INC.
Ref. Number: P16000026693

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Our records indicate that the subject corporation has not filed their current year annual report. Enclosed is an annual report form which must be completed and returned with the Articles of Revocation of Dissolution to the address at the bottom of this letter. The annual report filing fee is \$150 for a profit corporation and \$61.25 for a not for profit corporation

The fee to file the annual report is \$750.00

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 618A00025642

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PARRIS MAZZA GLOBAL, INC
DOCUMENT NUMBER: P16000026693

The enclosed *Articles of Revocation of Dissolution* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following.

Dominic J. MAZZA
Name of Contact Person

PARRIS MAZZA GLOBAL INC.
Firm/Company

3535 MELROSE AVENUE
Address

Titusville FL 32780
City/State and Zip Code

dominic.j.mazza@gmail.com
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Dominic J. MAZZA At (321) 362-5485
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
- MAILED

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF REVOCATION OF DISSOLUTION

Pursuant to section 607.1404, Florida Statutes, this Florida profit corporation revokes its Articles of Dissolution prior to the expiration of 120 days following the effective date (or file date, if no effective date) of the Articles of Dissolution:

FIRST: The name of the corporation is: DARRIS MAZZA GLOBAL INC.

SECOND: The document number of the corporation (if known) is P16000026693

THIRD: The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State is 9/6/2018
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records

FOURTH: The Revocation of Dissolution was authorized on 9/9/2018

FIFTH: Adoption of Revocation of Dissolution (check one)

- ☐ The board of directors revoked the dissolution.
☐ The incorporators revoked the dissolution.
☒ The board of directors revoked the dissolution authorized by the shareholders and revocation was permitted by action by the board of directors alone pursuant to that authorization.
☒ The shareholders revoked the dissolution and the number of votes cast was sufficient for approval.
☐ The shareholders revoked the dissolution by voting groups - the number of votes cast by

_____ was sufficient for approval.
 (Voting group)

SIXTH: A copy of the Articles of Dissolution is attached.

Signature

Dominic J. Mazza

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee or other court appointed fiduciary, by that fiduciary)

DOMINIC J. MAZZA
 (Typed or printed name of person signing)

President

(Title of person signing)

2019 JAN -4 PM 4:06
 SECRETARY OF STATE
 TALLAHASSEE, FL

FILED

FILING FEE \$35

FILED
Sep 06, 2018
Secretary of State

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida corporation submits the following Articles of Dissolution:

- FIRST: The name of the corporation as currently filed with the Florida Department of State:
PARRIS MAZZA GLOBAL, INC.
- SECOND: The document number of the corporation: P16000026693
- THIRD: The date dissolution was authorized: September 6, 2018
Effective date of dissolution: September 6, 2018
- FOURTH: Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: JUSTIN PARRIS

VICE PRESIDENT

Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative

FILED
Sep 06, 2018
Secretary of State

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

Name of Corporation:

PARRIS MAZZA GLOBAL, INC.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.

Description of information that must be included in a claim:

THIS NOTICE OF CORPORATION WAS A VOLUNTARY DISSOLUTION BETWEEN ALL PARTIES INVOLVED

Mailing address where claims can be sent:

3535 MELROSE AVE
3535 MELROSE AVE
TITUSVILLE, FL 32780 UN

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: JUSTIN PARRIS

Electronic Signature of the Person Filing